

Many professional organizations have recommended adult vaccines and have developed programs for their delivery. Standards for adult immunization practice have been developed by the National Coalition for Adult Immunization (Centers for Disease Control, 1990). And the Federal Government has taken an active role, most notably in the Medicare Influenza Vaccine Demonstration conducted during the period from 1988 to 1992. Pneumococcal vaccine has been covered by Medicare for a number of years, with coverage for influenza vaccination being added on October 1, 1993. However, there is a continued concern that the physician payment for vaccine administration is so low (\$3.44) that it discourages health care providers from furnishing immunization services.

The General Accounting Office is conducting a study of strategies used by the Department of Health and Human Services to improve immunization rates among Medicare beneficiaries. The study, to be completed in 1994, is focusing on (1) the adult immunization program at Centers for Disease Control and Prevention (CDC) and (2) coverage and use of immunization services under Medicare programs at the Health Care Financing Administration. The CDC does not presently provide funds for States to promote adult immunization.

Full use of existing vaccines would prevent many deaths and avert considerable suffering (see table 3). Any discussion of adult immunization in the United States must take place within the context of the debate over health care reform. The demonstrated cost-effectiveness of several adult vaccines argues strongly for their fuller use (see section XI). Improving adult immunization will require greater awareness by the general public and health care providers of the importance of vaccine-preventable diseases and the effectiveness and safety of the vaccines. It will also require closer working relationships among health care professionals, vaccine manufacturers, and the payers for health care services.

A recent report of the NVAC identifies the major goals and recommended strategies for strengthening adult immunization efforts in the United States (NVAC, 1994b). The NVPO with other agencies (see section X) will identify steps that Federal agencies can take to implement the NVAC report. Likewise, States will be encouraged to implement the recommendations in the report. The task is complex and the effort and resources needed to achieve success will be substantial. The urgent need to address adult immunization vigorously is highlighted by the dramatic increases expected beyond the year 2000 in the proportion of the total population that is over the age of 65.

UNDOCUMENTED INDIVIDUALS

One group at particular risk of underimmunization consists of so-called undocumented individuals, including children, resident in the United States. Reaching and keeping immunization records on undocumented people pose particular problems because the individuals may deliberately avoid such contacts if they are fearful of jeopardizing their situation. From a public health perspective, underimmunization of undocumented residents poses the same threat of disease transmission as does the underimmunization of legal residents. Hence, it is important that undocumented individuals receive recommended vaccinations both for protection of the public health and for their own benefit.